

**REQUEST TO APPEAR BEFORE
THE DURHAM CITY COUNCIL
AT THE WORK SESSION**

Date: May 24 / 2011

Council Work Session Meeting Date: June 9 / 2011

Name: Sandra Davis

Address: 905- Apt. Wadsworth St

Email address: Tarhells123@yahoo.com

Phone number: 919-395-6239 Fax number: _____

Organization Represented (if any): _____

Topic: Statement of presentation you wish to make and statement of action you wish Council to take. Attach additional sheets if necessary.

Inspection of Apartments, Council to help get
apartment up to Standards, Clean Vents and/or
ducts service air and heating systems, Lynn
Haven Apartments Complex

Signature Sandra Davis

This form must be returned to the Agenda Coordinator by **Monday at 5:00 pm** ten days prior to the City Council Work Session meeting at which you wish to speak. Once this form is submitted, no further reminder will be given. Citizens may call the Agenda Coordinator's Office at 560-4222 to confirm receipt of this form.

Please send this form to: Agenda Coordinator
City Manager's Office
101 City Hall Plaza
Durham, North Carolina 27701
Fax # (919) 560-4949